U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Managem and Budget No. 1215-0188 Expires 11-30-20

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only	
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	
1. File Number U / 1310	2. Fiscal Year Covered From:
	[] 61 / 2004 Through: [] / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name THOMAS S KAISER	Name IBSWWIII
	Lebor Organization File Number
P.O. Box, Blog., Room No., # any	P.O. Box, Building and Room Number, if any
Street 72682 VRAIN ST	Street 5965 E 39th AV2
CHY BROOM FLELD	City DENJER
State COLORADO ZIP Code +4 30020 -5776	State (.0 LODADO ZIP Code + 4 80207-123
5. Position in labor organization. Exactive BOARD MEMBER	
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). 7.a. Nature of Interest, Transaction, or Income.	
Name	
Trade Name, If any:	
P.O. Box, Bldg., Room No., If any	A STATE OF THE STA
Street	7.b. Amount.
City	
State ZiP Code + 4	
Signature	
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.).	

Date

Telephone Number